Case 19-15205-pmm Doc 91 Filed 02/14/23 Entered 02/14/23 10:43:30 Desc Main Document Page 1 of 2

Fill	in this information to identify your ca	ase:								
Det	tor 1 Patrick L. Fi	restone								
	otor 2 use, if filing)									
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF PENNSYLVANIA							
Case number 19-15205 PMM (if known)				_	neck if this is: An amended filing A supplement showing postpetition chapter					
Of	fficial Form 106I					13 income a	s of the fo 2023	g pospetition to ellowing date: —	alaptei	
	chedule I: Your Inc	nme				IVIIVI / DD/ T	111		12/15	
supp spor attac	s complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not fili r spouse is not filing w On the top of any additi	ng jointly, and your s ith you, do not inclu	spouse i de infon ur name	is liv matic	ing with you, inclu on about your spo	de informuse. If mo	nation about y ore space is n	your eeded.	
1.	Fill in your employment information.		Debtor 1			Debtor 2	Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with information about additional employers.	Employment etetus	☐ Employed			☐ Emplo	☐ Employed			
		Employment status Occupation	Not employed	☐ Not er	☐ Not employed					
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?							
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the dayse unless you are separated.	ate you file this form. If	you have nothing to re	eport for	any l	ine, write \$0 in the	space. Inc	dude your non	-filing	
-	u or your non-filing spouse have mo		ombine the information	n for all e	emplo	oyers for that perso	n on the li	nes below. If y	ou need	
						For Debtor 1		btor 2 or ng spouse		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	N/A		
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A		
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$	N/A		

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Patrick L. Firestone	=	•	Case	e number (if known)	19-	15205 P	MR	A	
					Fo	r Debtor 1		r Debtor n-filing s			
	Cop	y line 4 here	4.		\$	0.00	\$			N/A	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	i.	\$	0.00	\$			N/A	
	5b.	Mandatory contributions for retirement plans	5b).	\$	0.00	\$			N/A	
	5c.	Voluntary contributions for retirement plans	50	: .	\$	0.00	\$			N/A	
	5d.	Required repayments of retirement fund loans	5d	l.	\$	0.00	\$	· · · · · · · · · · · · · · · · · · ·		N/A	
	5e.	Insurance	5e	: .	\$	0.00	\$			N/A	
	5f.	Domestic support obligations	5f.		\$	0.00	\$			N/A	
	5g.	Union dues	59		\$	0.00	\$			N/A	
	5h.	Other deductions. Specify:	_ 5h	1.+	\$	0.00	⊦\$			N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	0.00	\$			N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ _	0.00	\$_			N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a		\$	0.00	\$			N/A	
	8b.	Interest and dividends	8b).	\$_	0.00	\$			N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce					_				
		settlement, and property settlement.	80		\$	0.00	\$_			N/A	
	8d. 8e.	Unemployment compensation Social Security	8d 8e		\$	0.00	\$ S			N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:			\$ -	0.00	\$			N/A N/A	
	8g.	Pension or retirement income	89).	\$	1,014.68	\$			N/A	
	8h.	Other monthly income. Specify: VA Disability	81	1.+	\$	3,517.84	+ \$			N/A	
		Income Tax Refund			\$	346.41	\$			N/A	
		Contribution from Fiance			\$	400.00	\$_			N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	5,278.93	\$		N/A		
10	Cale	culate monthly income. Add line 7 + line 9.	10.	\$		E 278 02 ± \$		N/A	_	•	5.278.93
١٠.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_		3,270.93		WA		-	3,270.33
11.	Inch othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depo			•					0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certa</i> llies						e. 12.	\$		5,278.93
										ombin	
13.	Do :	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?						m	onthi	y income
		,		-							